

How to Adjust ICD-9 Coded Claims to Create Test ICD-10 Coded Professional Claims

Important considerations when working in the *CHAMPS – ICD10 Parallel/B2B* test system:

- a) MDCH anticipates that providers using this test system are experienced with SSO access, and are knowledgeable in how to navigate and work within the production CHAMPS system. Providers unfamiliar with the application should consult experienced associates within their organization.
- b) The test claims and any changes you enter in the *CHAMPS - ICD10 Parallel/B2B* Test system will **NOT** post to the CHAMPS production system.
- c) Please caution your associates to be careful selecting an application when using SSO, to insure they submit production claims in the CHAMPS system, and only test claims in the *CHAMPS - ICD10 Parallel/B2B* system.
- d) If desired, you may create a complete test claim (Professional, Dental, or Institutional) in the same way you would create a real-life claim in the production CHAMPS system. The following procedure allows you to make use of prior paid claims to aid in creating test ICD-10 Professional claims. The paid claims history available within the B2B Test system consists of claims paid in the production CHAMPS system within the date-of-service range of January 1st through June 30th, 2013.
- e) The procedure to create an Institutional or Dental claim varies somewhat from the following; please use the appropriate method for the type of claim you normally submit, and contact MDCH-B2B-Testing@michigan.gov if you have difficulty.
- f) The “dummy” ICD-10 implementation date, used only within the B2B Test system, is October 1st, **2013**. As announced by CMS, the national implementation of ICD-10 code usage will be October 1st, 2014.
- g) Do not close a window by clicking the X in the upper-right hand corner of the window, the underlying window will remain disabled and you'll have to re-login.

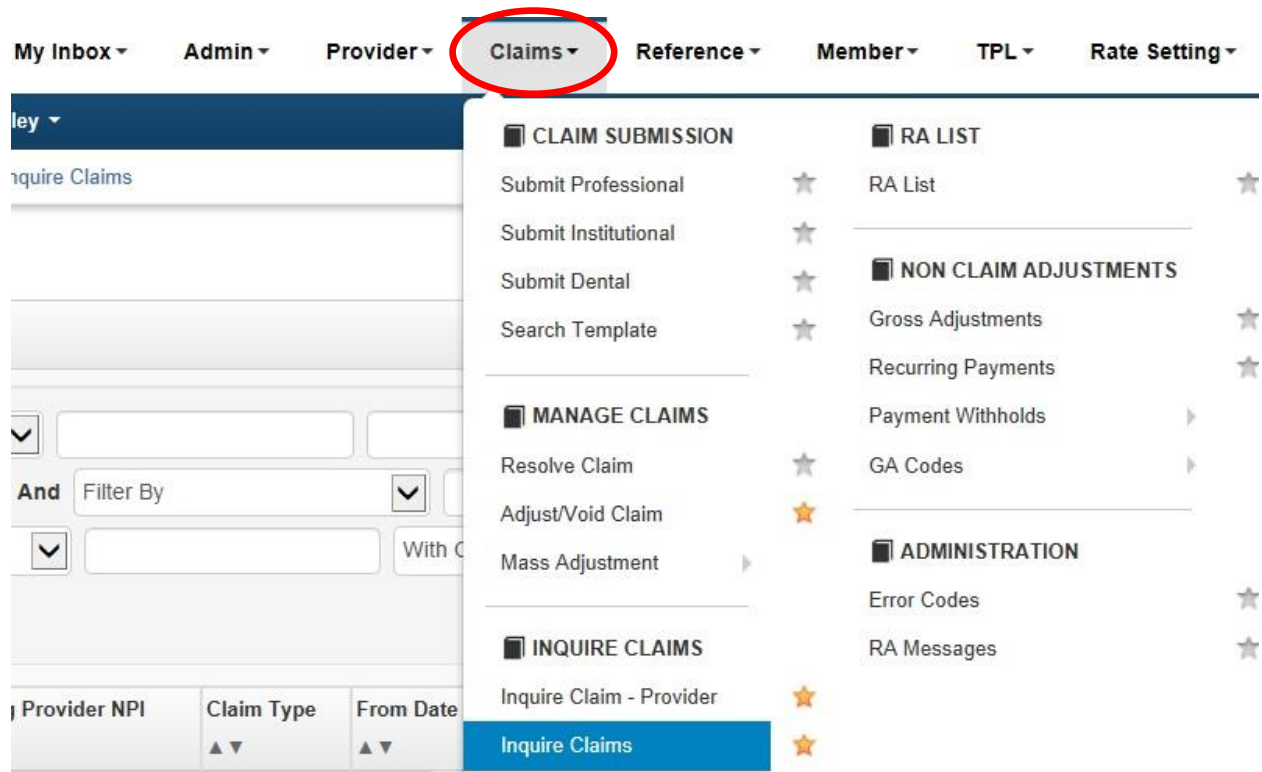


Please use the following to create a test Professional ICD-10 coded claim from a prior paid claim.

1. Login to the State of Michigan Single Sign-On @ <https://sso.state.mi.us/> and select the *CHAMPS - ICD10 Parallel/B2B* application.



2. Select a Claim to adjust. Click on the *Claims* tab and select *Inquire Claims*. (NOTE: You may create a favorite by highlighting the star to the right of this selection. This will create the *Select Favorite* shortcut available to you at the next time you login.) The CHAMPS - ICD10 Parallel/B2B System has paid claims within the date range of January 1st through June 30th, 2013. These previously-paid claims are available for creating your ICD-10 test claims. However, beneficiaries who were eligible under MA during early 2013 may subsequently have been changed to Managed Care eligibility: we suggest you verify eligibility when you select a paid claim to modify for ICD-10 testing.



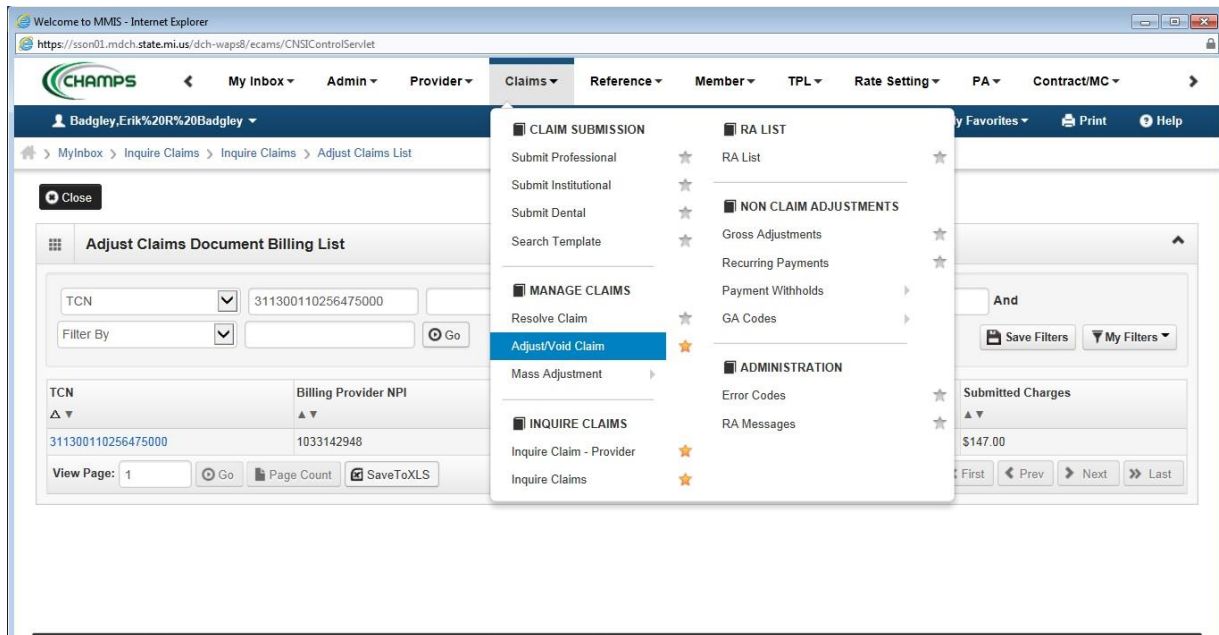
The screenshot shows the CHAMPS ICD10 B2B SSO Portal interface. The top navigation bar includes tabs: My Inbox, Admin, Provider, **Claims** (highlighted with a red circle), Reference, Member, TPL, and Rate Setting. Below the Claims tab, a dropdown menu is open, displaying the following sections:

- CLAIM SUBMISSION**
 - Submit Professional
 - Submit Institutional
 - Submit Dental
 - Search Template
- MANAGE CLAIMS**
 - Resolve Claim
 - Adjust/Void Claim
 - Mass Adjustment
- INQUIRE CLAIMS**
 - Inquire Claim - Provider
 - Inquire Claims** (highlighted in blue)
- RA LIST**
 - RA List
- NON CLAIM ADJUSTMENTS**
 - Gross Adjustments
 - Recurring Payments
 - Payment Withholds
 - GA Codes
- ADMINISTRATION**
 - Error Codes
 - RA Messages

On the left side of the screen, there are filter options for "And Filter By" and "With C". At the bottom, there are columns for "Provider NPI", "Claim Type", and "From Date".

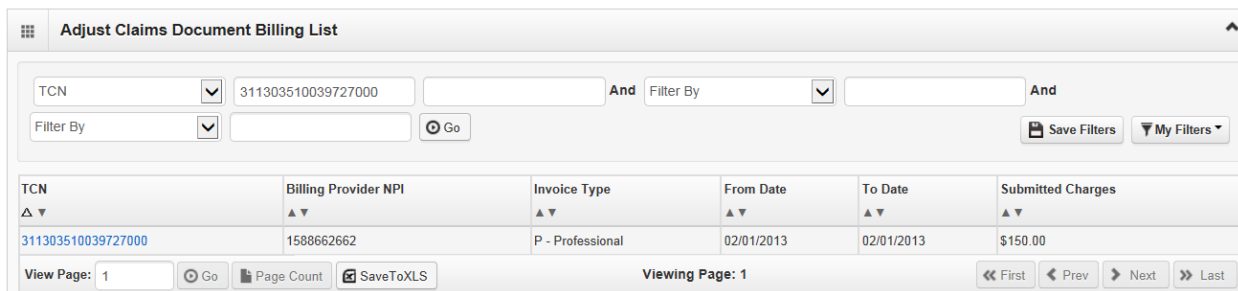
3. Set Filters as follows:
 - a. Enter a *Claim Type* of P, I or D (Professional, Institutional or Dental)
 - b. Enter *From/To Dates* of any interval from 01/01/2013 through 06/30/2013
 - c. Select *Paid* from *With Claim Status* list
 - d. Select *RA Generated* from *With Processing Status* list
 - e. Select *All* from *Last 6 Months* list
4. Select *GO* and then choose any of the returned results. Make sure it has ICD-9 codes (and verify eligibility). Make note of the TCN number for the claim you chose: you will need it in the steps that follow. After you've made note of the TCN number, click the *Close* button (do not close the window by clicking the X in the upper-right hand corner of the window, the underlying window will remain disabled and you'll have to re-login).

- Now that you've selected the claim that you want to modify, click on the *Claims* tab and select *Adjust/Void Claim*.



The screenshot shows the CHAMPS web application interface. The 'Claims' tab is selected in the top navigation bar. A dropdown menu is open, showing the 'Adjust/Void Claim' option highlighted. The main content area displays the 'Adjust Claims Document Billing List' form with various input fields and filters.

- Filter by TCN. Enter the TCN which you noted in Step 4. Select *Go*.




The screenshot shows the search results for a specific TCN. The 'Adjust Claims Document Billing List' form is displayed with the TCN field set to 311303510039727000. The search results table shows one entry with the following details:

TCN	Billing Provider NPI	Invoice Type	From Date	To Date	Submitted Charges
311303510039727000	1588662662	P - Professional	02/01/2013	02/01/2013	\$150.00


- Click on the TCN in the search results to view the Header Details. You will see another window pop up. This will be referred to as the Header Details window.

8. Change the date of service to 10/1/**2013** or later.

- a. Select the  Icon located in the upper right-hand corner of the Header Details window. This should take you to the Service Lines View (see below).

Header TCN: 311303510039727000
Beneficiary ID: 1082590103 Name: , NELLA

Show ▾

 Service Lines

Filter By ▾ And Filter By ▾

TCN ▲ ▽	Revenue Code ▲ ▽	Procedure Code ▲ ▽	Modifiers ▲ ▽	Dental Attribute ▲ ▽	From Date ▲ ▽	To Date ▲ ▽	Units ▲ ▽	Submitted Charges ▲ ▽	Approved Amount ▲ ▽	Claim Status ▲ ▽
311303510039727001		A6539	GY		02/01/2013	02/01/2013	2	\$150.00	\$142.40	Paid

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- b. Click on each TCN number link for each service line. Scroll down and change the *From Date* and *To Date* to be on, or after, the B2B Test system's ICD-10 implementation date of 10/1/**2013**. (This fictitious implementation date is only for use in the B2B Test system).

Header TCN: 311303510039727000
Line TCN: 311303510039727001
Beneficiary ID: 1082590103 Name: , NELLA

Rendering Provider ID: Type: Taxonomy: Referring Provider ID:

Ordering Provider ID: Type: Primary Care Referring Provider ID:

Auth #: Referral #:

From Date: 02/01/2013 To Date: 02/01/2013

Procedure Code: A6539 Manual Units:

Submitted Procedure Code: A6539 * Manual Price:

Modifiers: 1: GY 2: 3: 4: ASC Status:

Submitted Modifiers: 1: GY 2: 3: 4: ASC Code:

Diagnosis Pointers: 1: 1 * 2: 3: 4:



- c. Select *Save*, then *Cancel* to exit the screen. If successful, you will see the new *From Date* and *To Date* on the Service Lines Screen.

Header TCN: 411335371000062000
Name: , NELLA

Beneficiary ID: 1082590103
Show ▾

Service Lines
▲

Filter By ▾

And Filter By ▾

Go

Save Filters

My Filters ▾

TCN ▲ ▾	Revenue Code ▲ ▾	Procedure Code ▲ ▾	Modifiers ▲ ▾	Dental Attribute ▲ ▾	From Date ▲ ▾	To Date ▲ ▾	Units ▲ ▾	Submitted Charges ▲ ▾	Approved Amount ▲ ▾	Claim Status ▲ ▾
411335371000062001		A6539	GY		11/01/2013	11/01/2013	2	\$150.00		In Process

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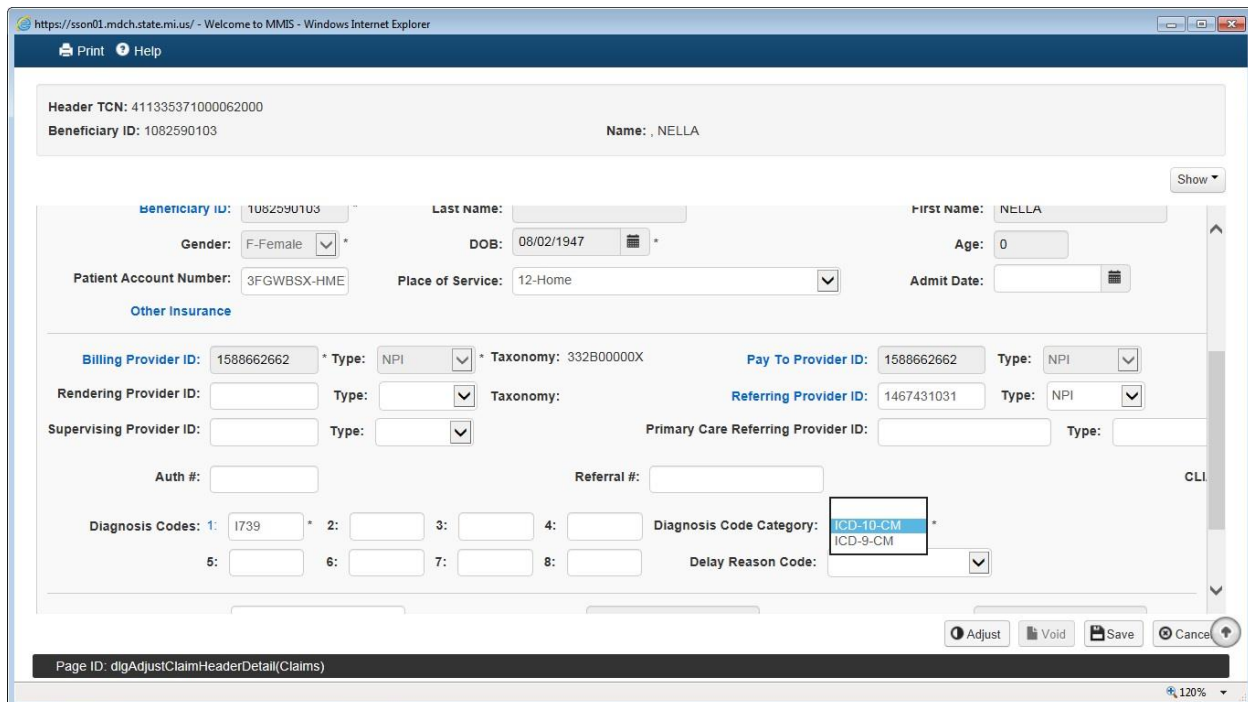
- d. Select *Cancel* one more time to return to the Header Details Screen.

9. Perform the ICD-9 to ICD-10 Conversion.

- a. On the Header Detail Screen, replace the listed ICD-9 Diagnosis Codes with the comparable ICD-10 codes. In this example, the ICD-10 code substituted for 4439 is I739.

ICD-9	Description		ICD-10	Description
4439	PERIPHERAL VASCULAR DISEASE UNSPECIFIED	➔	I739	PERIPHERAL VASCULAR DISEASE, UNSPECIFIED

- b. Select *ICD-10-CM* from the *Diagnosis Code Category* dropdown as shown below. Select *Save* and make note of the new TCN number at the top left of the page. You will need this TCN number for the steps that follow.



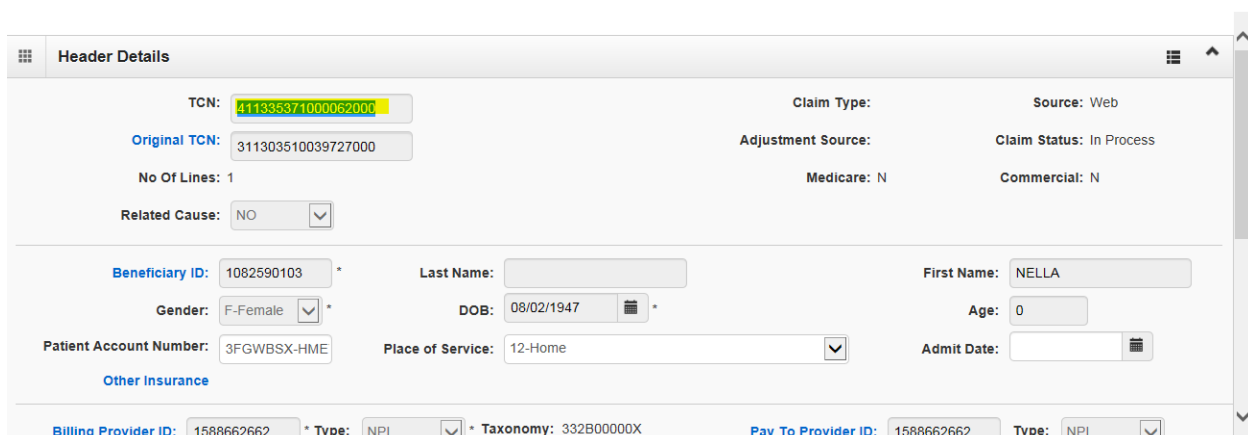
Header TCN: 411335371000062000
Beneficiary ID: 1082590103 Name: , NELLA

Beneficiary ID: 1082590103 Last Name: First Name: NELLA
Gender: F-Female * DOB: 08/02/1947 * Age: 0
Patient Account Number: 3FGWBSX-HME Place of Service: 12-Home Admit Date:
Other Insurance

Billing Provider ID: 1588662662 * Type: NPI * Taxonomy: 332B00000X Pay To Provider ID: 1588662662 Type: NPI
Rendering Provider ID: Type: Taxonomy: Referring Provider ID: 1467431031 Type: NPI
Supervising Provider ID: Type: Primary Care Referring Provider ID: Type:
Auth #: Referral #:
Diagnosis Codes: 1: 1739 * 2: 3: 4: Diagnosis Code Category: ICD-10-CM *
5: 6: 7: 8: Delay Reason Code: ICD-9-CM
Adjust Void Save Cancel

Page ID: dlAdjustClaimHeaderDetail(Claims)

NOTE: Although the new TCN number (Denoted *TCN* as highlighted below) has been generated after the save, it will not be final until you select *Adjust* in the next step.

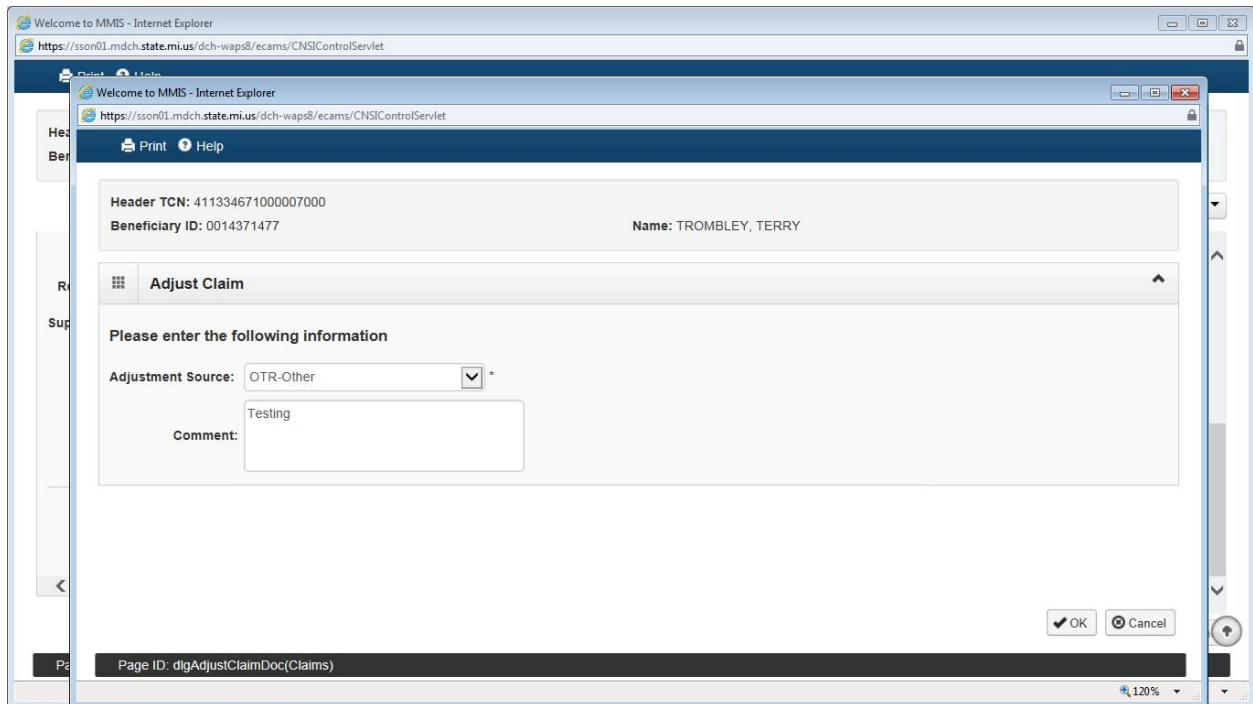


Header Details

TCN: 411335371000062000 Claim Type: Source: Web
Original TCN: 311303510039727000 Adjustment Source: Claim Status: In Process
No Of Lines: 1 Medicare: N Commercial: N
Related Cause: NO
Beneficiary ID: 1082590103 * Last Name: First Name: NELLA
Gender: F-Female * DOB: 08/02/1947 * Age: 0
Patient Account Number: 3FGWBSX-HME Place of Service: 12-Home Admit Date:
Other Insurance

Billing Provider ID: 1588662662 * Type: NPI * Taxonomy: 332B00000X Pay To Provider ID: 1588662662 Type: NPI

10. Select *Adjust*. On the next page, enter *OTR Other* from the *Adjustment Source* dropdown. Add "ICD9 to ICD10 Testing" to the *Comments* field. Select *OK* to submit.



Header TCN: 411334671000007000
Beneficiary ID: 0014371477
Name: TROMBLEY, TERRY

Adjust Claim

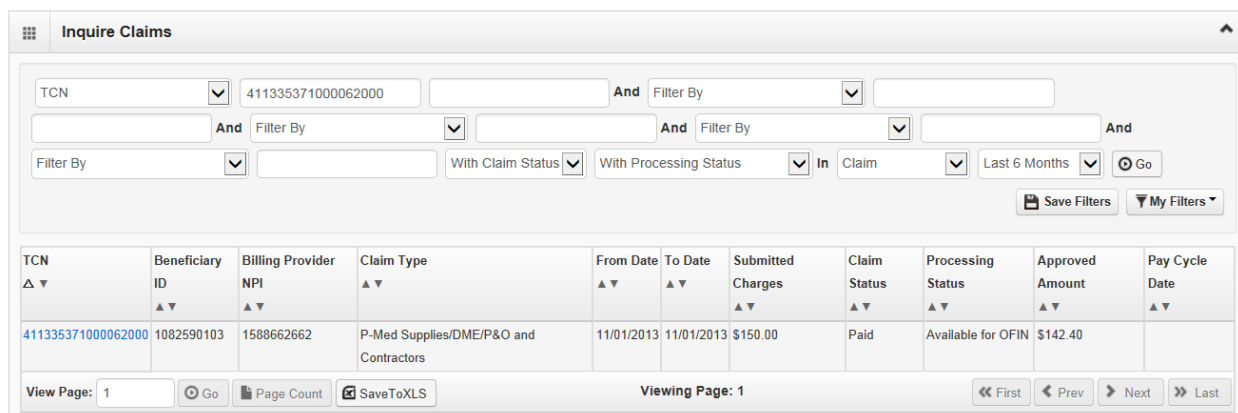
Please enter the following information

Adjustment Source: OTR-Other
Comment: Testing

OK Cancel

Page ID: dlgAdjustClaimDoc(Claims)

11. Now Check the Status of your claim. Go to Claims >> Inquire Claims. Enter Filter by TCN and enter the New TCN number from Step 10.



Inquire Claims

TCN 411335371000062000 And Filter By

Filter By With Claim Status With Processing Status In Claim Last 6 Months Go

Save Filters My Filters

TCN	Beneficiary ID	Billing Provider NPI	Claim Type	From Date	To Date	Submitted Charges	Claim Status	Processing Status	Approved Amount	Pay Cycle Date
411335371000062000	1082590103	1588662662	P-Med Supplies/DME/P&O and Contractors	11/01/2013	11/01/2013	\$150.00	Paid	Available for OFIN	\$142.40	

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The desired result should be a Paid Claim in the B2B test system.



Reminders:

1. The test claims you prepare in the above manner, and any changes you enter in the B2B Test system, will **NOT** post to the CHAMPS production system.
2. The paid claims history available within the B2B Test system consists of Professional claims paid in the production CHAMPS system within the date-of-service range of January 1st through June 30th, 2013.
3. The “dummy” ICD-10 implementation date used within the B2B Test system is 10/1/**2013**.
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8. Do not close a window by clicking the X in the upper-right hand corner of the window, the underlying window will remain disabled and you'll have to re-login.

If you have a question regarding creation of a test claim, please send an email to:

MDCH-B2B-Testing@michigan.gov